118000187872

. (Re	equestor's Name)	
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COVER LETTER

Division of Cor	porations		
NEXO EX	PRESS CARGO LLC		
SUBJECT:			
 -	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ANA CAROLINA ACOST	Ά	
		Name of Person	 -
	NEXO EXPRESS CARGO) LLC	
		Firm/Company	
	6560 NW 114 AVE #538		
		Address	
	DORAL FL, 33178		
		City/State and Zip Code	
	luishermandez771@gmail.c		
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please co	ult:	
Ana Carolina Acosta		786 329-3490	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEXO EXPRESS CARGO LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	<u>iny as it now appears on our reco</u> Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number 118000187872	of Organization for this Limited Liability Company were filed on AUGUST 06, 2018	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6560 NW 114 AVE #538 DO	ORAL FL 33178
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our recoi re:	rds, enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	lress
		Florida

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	RODRIGUEZ H., LUIS J. MR	RORAIMA ST. QUINTA TALISMAN	
		SAN BERNANDINO, CC 1010 VZ	■ Remove
			Change
MGR	HERNANDEZ, LUIS J	6560 NW 114 AVE #538 DORAL FL 33178	⊟ Add
			☐ Remove
			□ Change
MGR	SALAZAR DE H., IRELDA J. MRS	RORAIMA ST. QUINTA TALISMAN	
		SAN BERNARDINO CC 101 VZ	200 Egemove
			Change
MGR	SALAZAR, IRELDA J	6560 NW 114 AVE #538 DORAL FL 33178	Ø ■ Add
			□ Remove
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior	to date of filing	or more than 90 c	_ (optional) lays after filing.) Pur	suant to 6	605.02
<u>lote:</u> If the date inserted in this block does not meet the applications occurrent is effective date on the Department of State is records.	able statutory	filing requireme	ents, this date will	not be li	isted :
e record specifies a delayed effective date, but no The 90th day after the record is filed.	t an effecti	ve time, at 1	2:01 a.m. on	the ear	rlier
NOVEMBER 20 2018	· /	/			
ated	<u> </u>				
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Typed or printed name of signee

Filing Fee: \$25.00